

**The CQUIN Learning Network:
Workshop on HIV Differentiated Service Delivery: Opportunities and Challenges for TB
Prevention and Care**

Location: Radisson Blu Hotel, Lusaka, Zambia

Dates: March 26 - 29, 2019

Background:

The HIV Coverage, Quality and Impact Network ([CQUIN](#)) is designed to accelerate the expansion of high-quality HIV differentiated service delivery (DSD) by supporting south-to-south learning, diffusion of innovation, co-creation of practical knowledge and tools, focused technical assistance, and catalytic research. Launched in March 2017, CQUIN currently includes 11 countries (Cote d'Ivoire, eSwatini, Ethiopia, Kenya, Malawi, Mozambique, South Africa, Tanzania, Uganda, Zambia and Zimbabwe). Each year, CQUIN convenes several all-network meetings as well as selected topic-specific workshops for smaller groups of countries. In March 2019, ICAP at Columbia University and the World Health Organization will host a seven-country workshop on the implications of DSDM scale-up for the delivery of tuberculosis (TB) screening, diagnosis, prevention and care.

TB is the leading cause of death for people living with HIV (PLHIV) causing a third of the 940,000 global deaths among PLHIV in 2017.¹ Despite the scale-up of antiretroviral therapy (ART), TB incidence is also 20-fold higher amongst PLHIV than in HIV-negative populations.² Programmatic gaps remain: nearly half of people with HIV-associated TB fail to receive TB care, and less than one third of new enrollees in HIV care initiated TB preventive treatment (TPT) in the subset of countries that reported in 2017. In addition, while ART coverage among PLHIV with *diagnosed* TB is high, only 41% of PHIV *estimated* to have TB are receiving ART. These numbers are lower for children and adolescents. Sub-Saharan Africa (SSA) has a particularly heavy burden of HIV-associated TB, accounting for 72% of new TB cases among PLHIV and 84% of global deaths from TB in PLHIV in 2017. Thus, expanding the coverage and quality of TB services for PLHIV is a high priority for ministries of health in CQUIN member countries.

As countries scale up DSD services for HIV, there are important implications for TB programs. Shifting “stable” recipients of HIV care to less-intensive models is hoped to improve patient satisfaction, provider workload, and health system efficiency: it also means that many PLHIV will be spending less time at health facilities. DSD models such as appointment spacing and fast-track services require fewer and faster clinic visits. Models such as community antiretroviral groups (CAGs) mean that many services will take place at the community level. These changes create both challenges and opportunities for TB service delivery. Will these less-intensive models be able to provide effective TB screening and referrals? Can TPT be delivered to patients in community settings?

DSD models are not just for stable patients. The CQUIN network has also focused on the development of differentiated models for patients at high risk of disease progression (P@HR). CQUIN's 2017 “[Call to Action](#)” for P@HR DSD models highlighted the need to develop and disseminate models designed for patients with advanced disease, including those with TB/HIV.

In response, ICAP and WHO will be hosting an invitation-only workshop entitled “*HIV Differentiated Service Delivery: Opportunities and Challenges for TB Prevention and Care*” on March 26-29 in Lusaka, Zambia, in collaboration with the

¹ WHO. Global Tuberculosis Report, 2018.

² Kwan CK, Ernst JD. HIV and tuberculosis: a deadly human syndemic. Clin Microbiol Rev 2011;24:351-76.

Zambia Ministry of Health. The meeting will convene global experts and teams from seven of the CQUIN learning network member countries, including representatives from ministries of health, PEPFAR agencies, implementing partners and civil society. Over the course of 3.5 days, the meeting will explore the impact of differentiated HIV services on TB screening, diagnosis, prevention, and care, facilitate the exchange of relevant experiences, tools and best practices, and highlight innovations and new data.

Key Objectives:

- Identify opportunities and challenges posed by DSD for TB screening, diagnosis, prevention, and care
- Facilitate exchange of knowledge, best practices, innovations, resources and strategies for scaling up HIV associated TB interventions that can be built upon
- Identify common gaps, challenges and opportunities for future joint learning, co-creation of tools and resources and future south-to-south exchange visits

Participants:

The workshop will bring together approximately 100 participants from seven CQUIN network countries (Ethiopia, Kenya, Mozambique, South Africa, Uganda, Zambia and Zimbabwe). Country teams will include MoH (both HIV and TB programs), USG, implementing partners, representatives of national networks of PLHIV, civil society, and subject matter experts.

Agenda:

The meeting will begin with an opening reception the evening of Tuesday, March 26, followed by 3 full-day meetings from Wednesday, March 27 through Friday, March 29. Presentations will take the form of plenary, panel discussions, and breakout group discussions. A detailed agenda will be shared presently.

Meeting Outputs:

- Meeting report
- Terms of reference for a CQUIN community of practice on DSD & TB/HIV